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CONFIRMATION NO. 1823

Bib Data Sheet

SERIAL NUMBER 10/602,339	FILING DATE 06/24/2003 RULE	CLASS 324	GROUP ART UNIT 2829	ATTORNEY DOCKET NO. 10030548-1
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APPLICANTS

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** CONTINUING DATA *No*** FOREIGN APPLICATIONS *No*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/11/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC, 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	CO	14	24	2
Examiner's Signature <i>[Signature]</i> Initials <i>TM</i>				

ADDRESS

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TITLE

Optimized pln assignment with constraints

FILING FEE RECEIVED 822	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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